Case 18-12096-5-mcr Doc 14 Filed 01/04/19 Entered 01/04/19 16:19:27 Desc Main Document Page 1 of 23

Debtor 1		nd this filing:		
	George Orkan Stasior			
Debtor 2	First Name	Middle Name Last Name		
_	First Name	Middle Name Last Name		
Inited States Bankru	uptcy Court for the: NOR	HERN DISTRICT OF NEW YORK		
laaa mumhar 40	40000			
ase number 18-	12096			☐ Check if this is a amended filing
official Form	106A/R			
	A/B: Propert	y		12/15
formation. If more sp.	complete and accurate as p ace is needed, attach a sepa	List an asset only once. If an asset fits in more than one ossible. If two married people are filing together, both are attended to this form. On the top of any additional pages or Other Real Estate You Own or Have an Interest In	equally responsible for su	innlying correct
		st in any residence, building, land, or similar property?		
☐ No. Go to Part 2.				
Yes. Where is the	nroperty?			
21 Schuyler F Street address, if ava	illable, or other description	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property. Current value of the
21 Schuyler F Street address, if ava	illable, or other description NY 12211-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
21 Schuyler F Street address, if ava Albany City	illable, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property? \$385,367.00 Describe the nature of y	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$385,367.00
21 Schuyler F Street address, if ava	illable, or other description NY 12211-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$385,367.00 Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$385,367.00
21 Schuyler F Street address, if ava Albany City	illable, or other description NY 12211-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$385,367.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule Dins Secured by Property. Current value of the portion you own? \$385,367.00 Cour ownership interest ancy by the entireties, o
Albany City Albany	illable, or other description NY 12211-00	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$385,367.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$385,367.00 Cour ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Case 18-12096-5-mcr Doc 14 Filed 01/04/19 Entered 01/04/19 16:19:27 Desc Main Page 2 of 23 Document Debtor 1 George Orkan Stasior Case number (if known) 18-12096 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes **BMW** Do not deduct secured claims or exemptions. Put 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2015 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another **AUTO LEASE** \$0.00 \$0.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No. ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household Goods \$1,000.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

☐ Yes. Describe.....

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De	ebtor 1	George Orkan	Stasior		Case number (if known)	18-12096
	□ No		es, furs, leather coats	s, designer wear, shoes, acce	ssories	
	— 163.	·	Vearing Apparel			\$1,000.00
	■ No		lry, costume jewelry,	engagement rings, wedding r	ings, heirloom jewelry, watches, gems, ç	old, silver
	Exampl No	m animals les: Dogs, cats, bird	ds, horses			
	No	er personal and h		ı did not already list, includ	ing any health aids you did not list	
15	. Add th for Pai	ne dollar value of a rt 3. Write that nur	all of your entries from	om Part 3, including any en	tries for pages you have attached	\$2,000.00
		cribe Your Financial n or have any lega		est in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No			ur home, in a safe deposit bo	x, and on hand when you file your petition	·
	Deposite Example	s of money es: Checking, savir institutions. If y	ngs, or other financial ou have multiple acco	accounts; certificates of depo ounts with the same institution	osit; shares in credit unions, brokerage h n, list each.	ouses, and other similar
	Yes			Institution name:		
			17.1. Checking	NBT Bank		\$2,400.00
	Bonds, i Example	mutual funds, or p es: Bond funds, inv	oublicly traded stoc estment accounts wit	ks h brokerage firms, money ma	trket accounts	
	Yes	•••••	Institution or is:	suer name:		
			10 SHARES	OF GENERAL ELECTRIC		\$70.00
	Non-pub joint vei ■ No	olicly traded stock nture	and interests in inc	corporated and unincorpora	ated businesses, including an interest	in an LLC, partnership, and
I	□ Yes. 0	Give specific inform	ation about them Name of entity:		% of ownership:	
	Negotial	ble instruments incl	lude personal checks	negotiable and non-negotia , cashiers' checks, promissor ot transfer to someone by sign	y notes, and money orders.	
	ial Form	106A/B		Schedule A/R: Propert	v	

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Debtor 1	George Orkan Stasior	Case number (if known)	18-12096
☐ Yes.	Give specific information about them Issuer name:		
21. Retirer Examp ■ No	nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing pla	ans
	List each account separately. Type of account:	Institution name:	
Your s Examp	ry deposits and prepayments hare of all unused deposits you have made soles: Agreements with landlords, prepaid rent,	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companie	s, or others
■ No □ Yes.		Institution name or individual:	
23. Annuit ■ No	ies (A contract for a periodic payment of mon	ey to you, either for life or for a number of years)	
☐ Yes	lssuer name and description.		
24. Interest 26 U.S.	s in an education IRA, in an account in a q C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition progr	am.
☐ Yes	Institution name and descriptio	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
■ No		other than anything listed in line 1), and rights or powers exerc	isable for your benefit
	Give specific information about them , copyrights, trademarks, trade secrets, ar	ad atheritation of the standard of the standar	
Examp	les: Internet domain names, websites, procee	nd other intellectual property and strom royalties and licensing agreements	
	Give specific information about them		
27. License Examp ■ No	es, franchises, and other general intangible les: Building permits, exclusive licenses, coop	es perative association holdings, liquor licenses, professional licenses	
☐ Yes.	Give specific information about them		
Money or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax ref ■ No	unds owed to you		
	Give specific information about them, including	g whether you already filed the returns and the tax years	
	support les: Past due or lump sum alimony, spousal s	upport, child support, maintenance, divorce settlement, property se	ttlement
■ No □ Yes. 0	Give specific information		
30. Other a	mounts someone owes you es: Unpaid wages, disability insurance payme benefits; unpaid loans you made to some	ents, disability benefits, sick pay, vacation pay, workers' compensa one else	tion, Social Security
■ No □ Yes.	Give specific information		
Examp	s in insurance policies es: Health, disability, or life insurance; health	savings account (HSA); credit, homeowner's, or renter's insurance	
■ No □ Yes. N	lame the insurance company of each policy a		
Official Form	Company name: 106A/B	Beneficiary: Schedule A/B: Property	Surrender or refund page 4

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	Document Page 3 of 23	
Debtor 1	George Orkan Stasior Case number (if known) <u>18-12096</u>
		value:
If you somed	tterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to re one has died.	eceive property because
■ No □ Yes.	Give specific information	
33. Claims Exami	s against third parties, whether or not you have filed a lawsuit or made a demand for payment ples: Accidents, employment disputes, insurance claims, or rights to sue	
☐ Yes.	Describe each claim	
■ No	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights	to set off claims
☐ Yes.	Describe each claim	
35. Any fi r ■ No	nancial assets you did not already list	
☐ Yes.	Give specific information	
36. Add for Pa	the dollar value of all of your entries from Part 4, including any entries for pages you have attached art 4. Write that number here	\$2,470.00
Part 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you	own or have any legal or equitable interest in any business-related property?	
■ No. Go	o to Part 6.	
☐ Yes. (Go to line 38.	
Part 6: De If y	scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. ou own or have an interest in farmland, list it in Part 1.	
16. Do yo ı	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
No.	Go to Part 7.	
☐ Yes	Go to line 47.	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
	u have other property of any kind you did not already list? oles: Season tickets, country club membership	
■ No		
⊔ Yes.	Give specific information	
54. Add t	the dollar value of all of your entries from Part 7. Write that number here	\$0.00

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Deb	otor 1 George Orkan Stasior			Case number (if known)18-12	096
Part	t 8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2		•••••		\$385,367.00
56.	Part 2: Total vehicles, line 5		\$0.00		
57.	Part 3: Total personal and household items, line	15	\$2,000.00		
58.	Part 4: Total financial assets, line 36		\$2,470.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, I	ine 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$4,470.00	Copy personal property total	\$4,470.00
63.	Total of all property on Schedule A/B. Add line 55	; + line 62			\$389,837.00

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Fill in this info	rmation to identify your	Case:		
Debtor 1	George Orkan St	asior	And the second s	
•	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK	
Case number	18-12096			
(if known)	·			☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

٠.	and approable statutory amount.								
Pa	it 1: Identify the Property You Claim as E	Exempt							
1.	Which set of exemptions are you claiming	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Ame	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	21 Schuyler Road Albany, NY 12211 Albany County	\$385,367.00		\$85,367.00	NYCPLR § 5206				
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	Household Goods Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	NYCPLR § 5205(a)(5)				
	Line Holli Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit					
	Wearing Apparel Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	NYCPLR § 5205(a)(5)				
	Line Irom Scriedule AVB. 11,1			100% of fair market value, up to any applicable statutory limit					
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	3 years after that for ca	ises fil	·					

Official Form 106C

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		Document Pa	ge 8 of	23		
Fill in this information	on to identify you	ır case:				
Debtor 1	Seorge Orkan S	Stasior	Alban eri golda Even			
Fi	irst Name		t Name		-	
Debtor 2 (Spouse if, filing) Fi	irst Name	Middle Name Las	t Name			
United States Bankey	ntou Court for the					
United States Bankru	ptcy Court for the	NORTHERN DISTRICT OF NEW Y	ORK			
Case number 18-1	2096					
(if known)					_	if this is an
					amend	ded filing
Official Form 10	<u>06D</u>					
Schedule D:	Creditors	Who Have Claims Se	cured	by Propert	V	12/15
Be as complete and acc	urate as possible.	f two married people are filing together, bo out, number the entries, and attach it to thi	oth are equ	ally responsible for su	innlying correct informa	tion. If more space me and case
1. Do any creditors have	claims secured by	your property?				
		nis form to the court with your other sche	dules. Yo	u have nothing else t	o report on this form	
Yes. Fill in all o					o report our and roma.	
Part 1: List All Sec	cured Claims					
2. List all secured claim	s. If a creditor has r	nore than one secured claim, list the creditor s	separately	Column A	Column B	Column C
for each claim. If more th	nan one creditor has	a particular claim, list the other creditors in Proceeds or according to the creditor's name.	art 2. As	Amount of claim Do not deduct the	Value of collateral	Unsecured
				value of collateral.	that supports this claim	portion If any
2.1 Nationstar Mo	ortgage	Describe the property that secures the cl 21 Schuyler Road Albany, NY 12		\$300,000.00	\$385,367.00	\$0.00
		Albany County	211			
50.5	_	As of the date you file, the claim is: Check	all that			
PO Box 65078 Dallas, TX 752	-	apply.	an triat			
Number, Street, City, S		☐ Contingent ☐ Unliquidated				
, , ,		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortga car loan)	age or secu	red		
Debtor 2 only						
☐ Debtor 1 and Debtor 2 ☐ At least one of the det		☐ Statutory lien (such as tax lien, mechanic☐ Judgment lien from a lawsuit	s's lien)			
☐ Check if this claim re		Other (including a right to offset)				
community debt						
Date debt was incurred		Last 4 digits of account number				
و ما						
If this is the last page	f your entries in Co	olumn A on this page. Write that number he he dollar value totals from all pages.	ere:	\$300,00	·	
Write that number her		no demar talae totalo from all pages.		\$300,00	0.00	
Part 2: List Others t	to Be Notified for	a Debt That You Aiready Listed				
Use this page only if you trying to collect from yo	u have others to be u for a debt you ov y of the debts that	notified about your bankruptcy for a debt ve to someone else, list the creditor in Part you listed in Part 1, list the additional cred	t 1. and the	n list the collection an	ency here Similarly if y	IOU have more
Name, Number, St Mtglq Investo	treet, City, State & Z o rs, LP	ip Code	On which	line in Part 1 did you en	iter the creditor? 2.1	
C/O Ras Boris	skin, LLC		Last 4 dig	its of account number _		
900 Merchant Westbury, NY				_		

Official Form 106D

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Debto	Occige Office	n Stasior		Case number (if known)	18-12096
	First Name	Middle Name	Last Name		
	Name, Number, Street Shellpoint Mortg 75 Beattie Place Greenville, SC 29			On which line in Part 1 did you ente	

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Fil	I in this informat	tion to identify your	case:					
De	btor 1	George Orkan Sta	sior					
_	-	First Name	Middl	e Name	Last Name			
	btor 2 ouse if, filing)	First Name	Middl	e Name	Last Name			
Un	ited States Bankr	uptcy Court for the:	NORTHE	RN DISTRICT OF NE	EW YORK			
	se number 18-	-12096						if this is an ed filing
∩f	ficial Form	1065/5					amona	ou ming
		: Creditors W	ho Hay	o Unacourad	Claima			40/45
Be a	as complete and ac	curate as possible. Us	e Part 1 for	creditors with PRIORIT	Y claims and Part 2 for	creditors with NON	PRIORITY claims Li	12/15
any Sch Sch Ieft. nam	executory contract edule G: Executory edule D: Creditors Attach the Continue and case number	its or unexpired leases y Contracts and Unexp Who Have Claims Sec- uation Page to this pager (if known).	that could r ired Leases ured by Prope. e. If you hav	esult in a claim. Also li (Official Form 106G). D perty. If more space is r re no information to rep	ist executory contracts to not include any credi needed, convithe Part w	on Schedule A/B: P itors with partially s	roperty (Official Ford ecured claims that a	m 106A/B) and on re listed in
30.27		f Your PRIORITY Un have priority unsecure						
٠.	No. Go to Part		u ciaiins aga	iiiist you <i>t</i>				
	Yes.	۷.						
2.	List all of your pri identify what type of possible, list the cla	iority unsecured claims of claim it is. If a claim ha aims in alphabetical orde n one creditor holds a pa	s both priorit r according t	y and nonpriority amount o the creditor's name. If v	is, list that claim here and you have more than two	d show both priority a	nd nonpriority amount	s. As much as
	(For an explanation	n of each type of claim, s	ee the instru	ctions for this form in the		Total claim	Priority amount	Nonpriority amount
2.1	Internal Re	evenue Service		Last 4 digits of accour	nt number	\$63.15	\$63.15	\$0.00
	Priority Credit							Ψ0.00
	PO Box 21 Philadelph	nia, PA 19114		When was the debt inc	currea?			
	Number Stree	t City State ZIp Code		As of the date you file,	the claim is: Check all	that apply		
	Who incurred th	e debt? Check one.		☐ Contingent				
	Debtor 1 only			Unliquidated				
	Debtor 2 only			☐ Disputed				
	Debtor 1 and	Debtor 2 only		Type of PRIORITY uns	ecured claim:			
	At least one o	f the debtors and anothe	r	☐ Domestic support ob	ligations			
	☐ Check if this	claim is for a commun	ity debt		her debts you owe the go			
	Is the claim subj	ect to offset?		Claims for death or p	personal injury while you	were intoxicated		
	■ No			Other. Specify				
	Yes			20	17 INCOME TAXES	5		
2.2	Internal Re	evenue Service		Last 4 digits of accour	nt number	\$7,054.83	\$7,054.83	\$0.00
	PO Box 21			When was the debt inc	curred?			
	Number Stree	t City State Zlp Code		As of the date you file,	the claim is: Check all	that apply		
	Who incurred the	e debt? Check one.		☐ Contingent				
	Debtor 1 only			☐ Unliquidated				
	Debtor 2 only			☐ Disputed				
	Debtor 1 and I	Debtor 2 only		Type of PRIORITY uns	ecured claim:			
	☐ At least one of	f the debtors and anothe	r	☐ Domestic support ob	ligations			
	☐ Check if this	claim is for a commun	ity debt	■ Taxes and certain ot	her debts you owe the go	overnment		
	Is the claim subj			☐ Claims for death or p	•			
	■ No			Other. Specify				
	☐ Yes			201	13 INCOME TAXES	3		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 George Orkan Stasior	Case number (if known)	18-12096	
2.3 Internal Revenue Service Priority Creditor's Name PO Box 21126	Last 4 digits of account number \$277.12 When was the debt incurred?	\$277.12	\$0.00
Philadelphia, PA 19114	4	under .	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
\square At least one of the debtors and another	☐ Domestic support obligations		
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government		
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated		
■ No	Other. Specify		
☐ Yes	2012 INCOME TAXES		
2.4 Internal Revenue Service	Last 4 digits of account number \$334.91	\$334.91	\$0.00
Priority Creditor's Name PO Box 21126	When was the debt incurred?		
Philadelphia, PA 19114	When was the dept mouneur		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
☐ At least one of the debtors and another	☐ Domestic support obligations		
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government		
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated		
■ No	Other. Specify		
Yes	2011 INCOME TAXES		
2.5 Internal Revenue Service	Last 4 digits of account number \$27,298.20	\$27,298.20	\$0.00
Priority Creditor's Name PO Box 21126	When was the debt incurred?		· · · · · · · · · · · · · · · · · · ·
Philadelphia, PA 19114 Number Street City State Zlp Code			
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
■ Debtor 1 only	☐ Contingent		
•	☐ Unliquidated		
Debtor 2 only	Disputed		
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
At least one of the debtors and another	☐ Domestic support obligations		
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government		
Is the claim subject to offset?	\square Claims for death or personal injury while you were intoxicated		
■ No	Other. Specify		
☐ Yes	2007 INCOME TAXES		

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Del	otor 1 George Orkan Stasior	Case number (if known) 18-12096	
2.6	NYS Department of Taxation & Finance Priority Creditor's Name Bankruptcy Section PO Box 5300	Last 4 digits of account number \$0.00 When was the debt incurred?	\$0.00
	Albany, NY 12205 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	□ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	□ Disputed	
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Domestic support obligations	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated	
	Yes	Other. Specify NOTICE ONLY	
4.	Do any creditors have nonpriority unsecured claims No. You have nothing to report in this part. Submit to the Yes. List all of your nonpriority unsecured claims in the	this form to the court with your other schedules. alphabetical order of the creditor who holds each claim. If a creditor has more the	nan one nonpriority
	unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what type of claim it is. Do not list claims already ir creditors in Part 3.If you have more than three nonpriority unsecured claims fill out th	ncluded in Part 1. If more the Continuation Page of
]		
4.1	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$457.00
	PO Box 5529	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	_
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	DObligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
			_

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Debto	r 1 George Orkan Stasior	Case number (if known) 18-12096	
4.2	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$392.00
	PO Box 5529 Sioux Falls, SD 57117	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	National Grid Nonpriority Creditor's Name	Last 4 digits of account number 8144	\$12,648.16
	PO Box 11742 Newark, NJ 07101	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Navient	Last 4 digits of account number	\$75,000.00
	Nonpriority Creditor's Name PO Box 9988	When was the debt incurred?	
	Wilkes Barre, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another		
	☐ Check if this claim is for a community		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify	

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Debtor 1	George (Orkan Stasior	Document Page 14	_	sumber (if known)	18-12096	
4.5 C)'Connell	& Aronowitz editor's Name	Last 4 digits of account numbe	r <u>6816</u>	<u> </u>		\$5,026.65
5	4 State St	treet	When was the debt incurred?				
<u>A</u> N	Albany, NY umber Street	/ 12207 t City State Zlp Code	 As of the date you file, the clain	n ie: Choo	k all that apply		
		the debt? Check one.	As of the date you me, the claim	ii is. Chec	k ali tilat apply		
	Debtor 1 or	nly	☐ Contingent				
	Debtor 2 or	nly	☐ Unliquidated				
	Debtor 1 ar	nd Debtor 2 only	☐ Disputed				
	At least one	e of the debtors and another	Type of NONPRIORITY unsecur	ed claim:			
		nis claim is for a community	☐ Student loans				
	ebt the claim su _	ubject to offset?	Obligations arising out of a sepreport as priority claims				
	No		Debts to pension or profit-shar	ing plans,	and other similar de	ebts	
	Yes		Other. Specify				
5. Use this is trying have mo notified the Part 4:	page only if to collect from re than one for any debte Add the A	om you for a debt you owe to sor creditor for any of the debts that s in Parts 1 or 2, do not fill out or mounts for Each Type of Un: f certain types of unsecured clair	pout your bankruptcy, for a debt that meone else, list the original creditor you listed in Parts 1 or 2, list the add submit this page.	in Parts 1 ditional c	or 2, then list the creditors here. If you	collection agency here, and one have additional to the second sec	. Similarly, if you al persons to be
	6a.	Domestic support obligations		6a.	s s	Claim 0.00	
Tot clain						0.00	
from Part		Taxes and certain other debts	you owe the government	6b.	\$	35,028.21	
	6c.		njury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	ecured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a throi	ugh 6d.	6e.	\$	35,028.21	
					Total	Claim	
Tot	6f.	Student loans		6f.	\$	75,000.00	
claim	15	6.					
from Part	2 6g.	you did not report as priority o	paration agreement or divorce that laims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sha	ring plans, and other similar debts	6h.	s	0.00	
	6i.	Other. Add all other nonpriority unhere.	insecured claims. Write that amount	6i.	\$	18,523.81	
	6j.	Total Nonpriority. Add lines 6f t	hrough 6i.	6j.	\$	93,523.81	

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Fill in this info	ormation to identify your	case:		
Debtor 1	George Orkan Sta	asior		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK	
Case number	18-12096			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code State what the contract or lease is for

2.1 BMW Financial Services PO Box 9001065 Louisville, KY 40290 2015 BMW 325I

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	,	Documen	ii raye 10 0i	23	
Fill in this	information to identify you	ur case:			
Debtor 1	George Orkan S	Stasior		i i specialización (m. 2006 mars) est di Silvino (m. 1916 mars).	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the	: NORTHERN DISTRICT	OF NEW YORK		
Case num	ber 18-12096				
(if known)	10-12090				☐ Check if this is an
					amended filing
Officia	l Form 106H				
	lule H: Your Co	dobtors			
Scried	iule n. Toul Co	uentors			12/15
fill it out, a your name	nd number the entries in the and case number (if know you have any codebtors? (ne boxes on the left. Attach n). Answer every question	n the Additional Page	to this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
			·		
■ No □ Yes	•				
2. Witi Arizon	hin the last 8 years, have y a, California, Idaho, Louisiar	ou lived in a community pr na, Nevada, New Mexico, Pu	operty state or territo erto Rico, Texas, Wash	ry? (<i>Community propert</i> ington, and Wisconsin.)	y states and territories include
■ No	Go to line 3.				
_	s. Did your spouse, former sp	oouse, or legal equivalent live	e with you at the time?		
	,		·		
in line Form	2 again as a codebtor only	y if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and	I ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	e
	Name			□ Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street City	State	ZIP Code	_	
3.2				По-	
	Name			□ Schedule D, line □ Schedule E/F, I	
				☐ Schedule G, lin	
-	Number Street			_	
1	City	State	ZIP Code		

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	· Para A Para A Cara Cara Cara Cara Cara Cara Cara	Control of the Contro							
	in this information to identify your c	ase:			6-10-2				
De	btor 1 George Ork	an Stasior							
	btor 2 ouse, if filing)								
Un	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF NEW YORK						
	se number <u>18-12096</u>		_			Check if this is An amende A supplem	ed filing ent showin		
\cap	fficial Form 106I					13 income	as of the fo	ollowing date:	:
	W	omo				MM / DD/ \	YYY		
	chedule I: Your Inc								12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. 11: Describe Employment	r spouse is not filing w	ith you, do not includ	e infor	mation	about your spe	ouse. If mo	ore space is	needed.
1.	Fill in your employment information.		Debtor 1			Debtor :	? or non-fi	ling spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	☐ Not employed		
	employers.	Occupation	PHYSICIAN/SUR	GEON					
	Include part-time, seasonal, or self-employed work.	Employer's name	ALBANY EYE PH SURGEONS, PC	IYSICI	ANS 8	•			
	Occupation may include student or homemaker, if it applies.	Employer's address	4					,	
		How long employed t	horo? OO VE AF				·		
	····		here? <u>28 YEAF</u>	(5					
Pai	t 2: Give Details About Mor	thly Income					·····		
Esti spou	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	port for	any line	e, write \$0 in the	space. Inc	lude your no	n-filing
f yo	u or your non-filing spouse have mo e space, attach a separate sheet to	ore than one employer, co	ombine the information	for all e	employe	ers for that perso	n on the lir	nes below. If	you need
					F	or Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, or	ry, and commissions (be calculate what the month)	efore all payroll y wage would be.	2.	\$	11,266.67	\$	N/A	•
3.	Estimate and list monthly overti	me pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	\$	11,266.67	\$	N/A	

	or 1	George Orkan Stasior	-	Case number (if known)	18-12096	
	Cor	by line 4 here	4.	For Debtor 1 \$ 11,266.67	For Debtor	
5.	List	all payroll deductions:				
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ 2.897.64	c	\$1/A
	5b.	Mandatory contributions for retirement plans	5b.	\$ 2,897.64 \$ 0.00		N/A N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$ 0.00	- '	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$ 0.00		N/A
	5e.	Insurance	5e.	\$ 0.00	_ '	N/A
	5f.	Domestic support obligations	5f.	\$ 1,000.00		N/A
	5g.	Union dues	5g.	\$ 0.00		N/A
	5h.	Other deductions. Specify:	5h.+	\$ 0.00	+ \$	N/A
6.	Ado	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$ 3,897.64	\$	N/A
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 7,369.03	\$	N/A
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ 0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$ 0.00		N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ 0.00		N/A
	8d.	Unemployment compensation	8d.	\$ 0.00		N/A
	8e.	Social Security	8e.	\$ 0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$ 0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$ 0.00	\$	N/A
	8h.	Other monthly income. Specify:	_ 8h.+	\$ 0.00	+ \$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$0.00	\$	N/A
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$	7.369.03 + \$	NI/A	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ -	7,369.03 + \$	N/A	= \$ 7,369.03
	inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend	-	sted in Schedule	∍ J. +\$0.00
	Add Write appl	the amount in the last column of line 10 to the amount in line 11. The results that amount on the Summary of Schedules and Statistical Summary of Certain ies	ult is the Liabili	e combined monthly lities and Related <i>Dat</i>	income. a, if it 12.	\$ 7,369.03
		4				Combined
13.	Do y	you expect an increase or decrease within the year after you file this form? No. Yes Explain:	•			monthly income

Fil	l in this information to identify your case:				
De	btor 1 George Orkan Stasior		Chec	ck if this is:	
De	btor 2			An amended filing	dan anaka akti a aka at
(Sp	pouse, if filing)			13 expenses as of	ving postpetition chapter the following date:
Un	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW	YORK	-	MM / DD / YYYY	
1	se number 18-12096				
(If I	known)				
$\overline{}$	ifficial Form 106J				
	chedule J: Your Expenses				
Be	as complete and accurate as possible. If two married people ar	e filing together, bot	h are equ	ally responsible fo	12/1:
ınt	ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.	form. On the top of a	iny additio	onal pages, write y	our name and case
	tt 1: Describe Your Household				
1.					
	■ No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate Househ	old of Debi	or 2.	
2.	Do you have dependents? ■ No	·			
	Do not list Debtor 1 and Yes. Fill out this information for	Dependent's relation	nehin to	Dependent's	Door donardant
	Debtor 2.	Debtor 1 or Debtor 2	2	age	Does dependent live with you?
	Do not state the				□ No
	dependents names.			-	☐ Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
	yoursell and your dependents?				
Pa	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you	ou are using this far			
exp	penses as of a date after the bankruptcy is filed. If this is a suppolicable date.	lemental Schedule J	m as a su , check th	e box at the top of	the form and fill in the
Inc	lude expenses paid for with non-cash government assistance if	vou know			
the	value of such assistance and have included it on Schedule I: Y	our Income			
(0)	ficial Form 106l.)			Your expe	rises
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		2,050.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		150.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor 	no oquity loons	4d. \$ 5. \$		0.00
Ο.	- Additional mortgage payments for your residence, SUCH as not	HE EQUILY IDANS	ე. ა		0.00

Deb	otor 1	George	Orkan Stasior	Case nur	mber (if known)	18-12096
6.	Utilit	ies:				
	6a.	Electricity	/, heat, natural gas	6a	. \$	400.00
	6b.	Water, se	ewer, garbage collection	6b		0.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c		222.00
	6d.	Other. Sp		6d		0.00
7.	Food	and hous	sekeeping supplies	7		1,000.00
8.			children's education costs	8		0.00
9.	Cloth	ning, laund	dry, and dry cleaning	9.		100.00
10.			products and services	10		100.00
			ental expenses	11.		100.00
12.	Trans	sportation	. Include gas, maintenance, bus or train fare.			
	Do no	ot include c	car payments.	12.	. \$	600.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	. \$	100.00
			tributions and religious donations	14.	. \$	25.00
15.	Insur					
	150 NO	ot include ir Life insura	nsurance deducted from your pay or included in lines 4 or 20.	4-	•	
		Health ins		15a.	·	0.00
				15b.		0.00
		Vehicle in		15c.		132.55
16			urance. Specify:	15d.	. \$ <u></u>	0.00
10.	Speci	s. Do not in if.v	nclude taxes deducted from your pay or included in lines 4 or 20.	16	œ.	
17	•		ease payments:	16.	\$	0.00
			ease payments. ents for Vehicle 1	17a.	\$	0.00
			ents for Vehicle 2	17a. 17b.		0.00
		Other, Spe		17b.		0.00 719.27
		Other, Spe		17d.		
18.			s of alimony, maintenance, and support that you did not repor		Ψ	0.00
	dedu	cted from	your pay on line 5, Schedule I. Your Income (Official Form 10	61). 18.	\$	0.00
19.	Other	r payments	s you make to support others who do not live with you.	,.	\$	100.00
			D SUPPORT STATUTORY ADD-ONS	19.		100.00
20.	Other	r real prop	erty expenses not included in lines 4 or 5 of this form or on 5	Schedule I: Y	our Income.	
	20a.	Mortgages	s on other property	20a.		0.00
		Real estat		20b.	\$	0.00
			homeowner's, or renter's insurance	20c.	\$	0.00
			nce, repair, and upkeep expenses	20d.	\$	0.00
			ner's association or condominium dues	20e.	\$	0.00
21.	Other	r: Specify:		21.	+\$	0.00
22	Calci	ilate voiir i	monthly expenses			
			through 21.		\$	E 700 00
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J	l_2		5,798.82
			a and 22b. The result is your monthly expenses.	1-2	\$	
	ZZC. F	100 III6 22	a and 22b. The result is your monthly expenses.		\$	5,798.82
23.			monthly net income.		L	
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	7,369.03
	23b.	Copy your	r monthly expenses from line 22c above.	23b.	-\$	5,798.82
	23c.		our monthly expenses from your monthly income.			4 570 04
		The result	is your monthly net income.	23c.	\$	1,570.21
24	Dava	ni avnost s	an increase or decrease in your aymen within the control		. fa	
4 4.	For exa	ample, do vo	an increase or decrease in your expenses within the year afte ou expect to finish paying for your car loan within the year or do you expect	er you file this	s torm?	asa or decrease bocause of a
	modific	cation to the	terms of your mortgage?	, our mortgage	payment to mole	ase of decrease pecause Of a
	■ No).				
	☐ Ye		Explain here:			

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Fill in this infor	mation to identify your	case:		
Debtor 1	George Orkan St	asior		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK	
	18-12096			
(if known)				Check if this is an amended filing

Official Form 106Sum

Summary	of Your Asse	ts and Liabilities	and Certain	Statistical Information	12/
			, wild oditalli	Otationion information	121

nrc	as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	or supplyi ed sched	ing correct ules after you file
Pa	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	385,367.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,470.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	389,837.00
Pa	t2: Summarize Your Liabilities		
		and the state of t	liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	300,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	35,028.21
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	93,523.81
	Your total liabilities	\$	428,552.02
Par	3: Summarize Your Income and Expenses	L	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,369.03
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,448.82
Par	4: Answer These Questions for Administrative and Statistical Records		
3.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

- - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Deb	tor 1 George Orkan Stasior Case number (if known) 18-1209)6	
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	n	11,263.20

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	35,028.21
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	75,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	110,028.21

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Fill in this information to identify your	case:			
Debtor 1 George Orkan Sta	asior			
First Name	Middle Name	Last Name	····	
Debtor 2				
(Spouse if, filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF NEW YORK		
Case number 18-12096				
(if known)				☐ Check if this is an amended filing
Official Form 106Dec Declaration About a	ın Individua	l Debtor's Sci	hadulas	4045
Decidiation About a	iii iiiaiviaaa	i Debioi 3 30	iledules .	12/15
If two married people are filing together	, both are equally resp	onsible for supplying corre	ect information.	
You must file this form whenever you fi obtaining money or property by fraud ir years, or both. 18 U.S.C. §§ 152, 1341, 1	n connection with a bar	es or amended schedules. nkruptcy case can result in	Making a false stateme fines up to \$250,000, o	ent, concealing property, or or imprisonment for up to 20
Sign Below				
Did you pay or agree to pay some	one who is NOT an atto	orney to help you fill out ba	ankruptcy forms?	
■ No				
Yes. Name of person	- Made Barmaptey Comment repaired Notice			
			Deciaration, an	nd Signature (Official Form 119)
Under penalty of perjury, I declare that they are true and correct.	that I have read the sur	mmary and schedules filed	with this declaration a	and
x Gerge Onko	n Starin	х		
George Orkan Stasior Signature of Debtor 1		Signature of D	Debtor 2	

Date

Date January 4, 2019